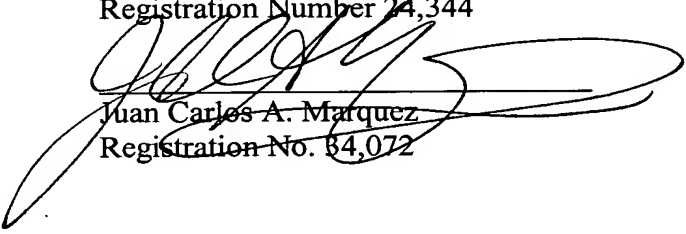




- [ ] Please charge my **Deposit Account Number** in the amount of \_\_\_\_\_ to cover the fees for \_\_\_\_\_. A duplicate copy of this paper is enclosed.
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- [ x ] The Commissioner is hereby authorized to charge any additional fees associated with this communication, or credit any overpayment to **Deposit Account Number 08-1480**.

Respectfully submitted,

\_\_\_\_\_  
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**February 21, 2006**



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re U.S. Patent Application of	)	
	)	
MIYAMOTO et al.	)	Art Unit 2653
	)	
Application Number: 10/766,206	)	Examiner
	)	Castro, Angel A.
Filed: January 29, 2004	)	
	)	
For: DISK ARRAY APPARATUS	)	
	)	
Attorney Docket No. ASAM.0105	)	

Commissioner of Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE AND AMENDMENT UNDER 37 C.F.R. § 1.111**

Sir:

This is in response to the Office Action dated December 23, 2005, the period for response to which expires on March 23, 2006. Please amend the above-identified application as follows: